IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

1794

Examiner: Kevin M. Bernatz

In re Patent Application of

Atty MJS-4105-17 Dkt. C# MAR 0 3 2008 M#

C/A.U.

ONOE, A. et al.

Serial No. 10/615,403

Filed:

Title:

Date: March 3, 2008 July 9, 2003

DIELECTRIC RECORDING/REPRODUCING HEAD AND TRACKING METHOD

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ Correspondence Address Indication Form Attached.

Fees are attached as calculated below:

minus highest number Total effective claims after amendment 24 x \$50.00 \$0.00 (1202)/\$0.00 (2202) \$ previously paid for 24 (at least 20) = Independent claims after amendment 5 minus highest number \$0.00 (1201)/\$0.00 (2201) \$ previously paid for x \$210.00 5 (at least 3) =If proper multiple dependent claims now added for first time, (ignore improper); add \$370.00 (1203)/\$185.00 (2203) \$ Petition is hereby made to extend the current due date so as to cover the filing date of this One Month Extension \$120.00 (1251)/\$60.00 (2251) paper and attachment(s) Two Month Extensions \$460.00 (1252)/\$230.00 (2252) Three Month Extensions \$1050.00 (1253/\$525.00 (2253) Four Month Extensions \$1640.00 (1254/\$820.00 (2254) Five Month Extensions \$2,230.00 (1255/\$1115.00 (2255) \$ \$130.00 (1814)/ \$65.00 (2814) \$ Terminal disclaimer enclosed, add Applicant claims "small entity" status. Statement filed herewith 0.00 \$180.00 (1806) \$ Rule 56 Information Disclosure Statement Filing Fee

CREDIT CARD PAYMENT FORM ATTACHED.

The Commissioner is hereby authorized to charge any deficiency, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140. A duplicate copy of this sheet is attached.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

Assignment Recording Fee

MJS:dbp

Other:

NIXON & VANDERHYE P.C.

By Atty: Michael J. Shea, Reg. No. 34,725

\$40.00 (8021)

TOTAL FEE \$

\$

\$

0.00

0.00

0.00

Signature: // // // // // Signature:



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Sir:

RESPONSE TO RESTRICTION REQUIREMENT

In response to the restriction requirement dated February 20, 2008, Applicant elects without traverse the claims of Group I (i.e., claims 1-18). Applicant reserves the right to file divisional application(s) directed to the subject matter of the non-elected claims.

Respectfully submitted,

NIXON & VANDERHYE P.C.

Michael J. Shea

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